Alaska Public Health System Assessment

Jay C. Butler, MD, CPE Senior Director for Community Health Services

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What is *Health*?

 "State of complete physical, mental, and social well being, and not merely the absence of disease or infirmity."

- Preamble to the Constitution of the WHO, 1948



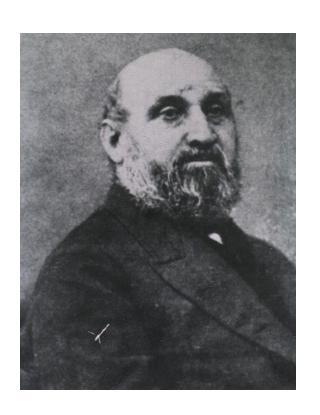
Dr. Brock Chisholm of Canada, 1st WHO Director-General 1948

"Death is a fact.

All else is inference."

William Farr

(1807–1883)



What is Public Health?

"What we as a society do collectively to assure the conditions in which people can be healthy."

Institute of Medicine, 1988





 "All organized measures (whether public or private) to prevent disease, promote health, and prolong life among the population as a whole"

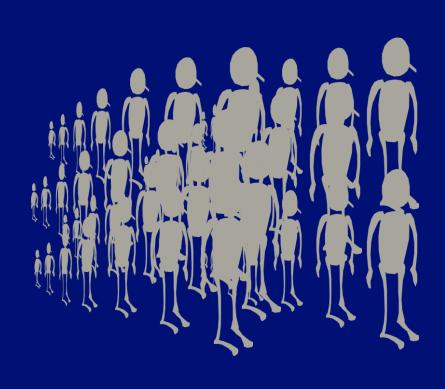
What does medicine do?

Saves lives one at a time

What does public health do?

Saves lives millions at a time





The 10 Essential Public Health Services

- 1. Monitor health status
- 2. Investigate and diagnose health problems and hazards.
- 3. Inform and educate people regarding health issues.
- 4. Mobilize partnerships to solve community problems.
- 5. Support policies and plans to achieve health goals.
- 6. Enforce laws and regulations to protect health and safety.
- 7. Link people to needed personal health services.
- 8. Ensure a skilled, competent public health workforce.
- 9. Evaluate effectiveness, accessibility and quality of health services.
- 10. Research and apply innovative solutions.



Who Provides These Services in the US and in Alaska?

- Public/Governmental
 - 51 State Health Departments
 - 8 Territorial Health Departments
 - >2500 Local Health Departments
 - Tribal Health Departments
 - Federal agencies









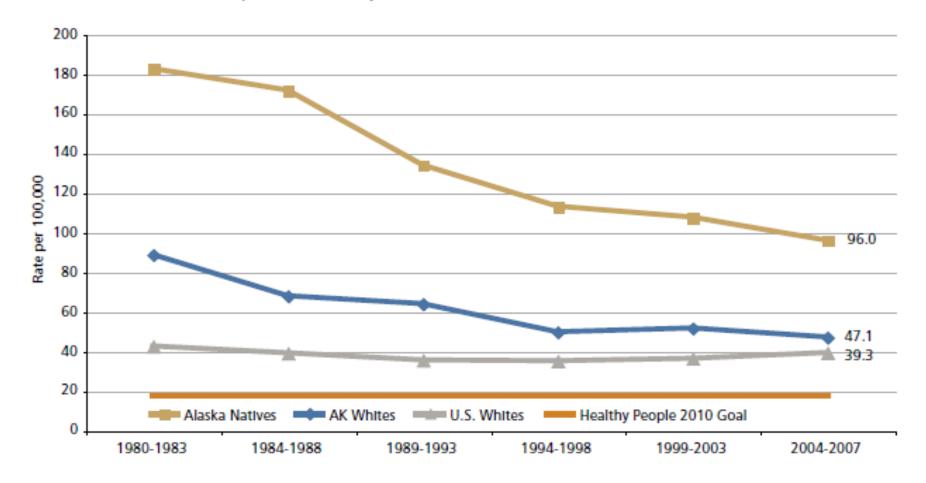
- Private
 - Schools and universities
 - NGOs, not-for-profit organizations
 - Hospitals, health systems, health plans, HMOs
 - Employers
 - More...



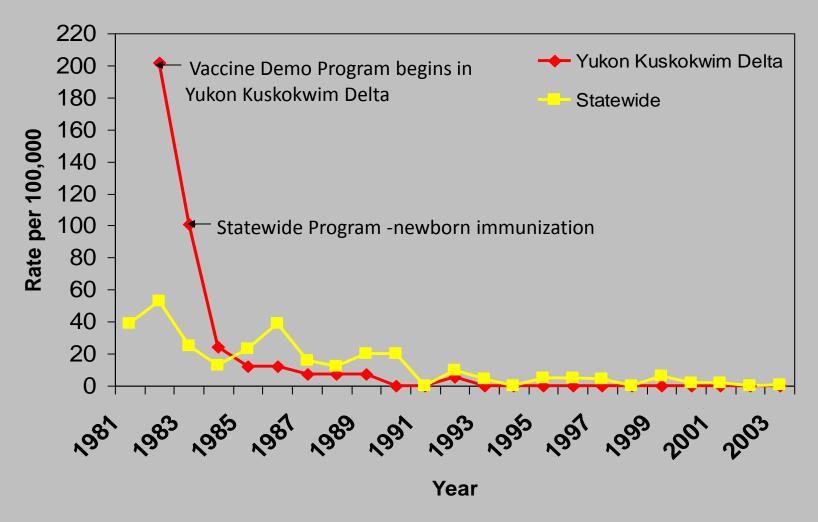
1. Monitor health status to identify and solve health problems

Average Annual Age-Adjusted Unintentional Injury Death Rates per 100,000, 1980-2007

Data Source: Alaska Bureau of Vital Statistics
U.S. Data Source: Surveillance, Epidemiology, and End Results (SEER) Program
U.S. Whites and AK Whites 2004-2007 data point is for 2004-2005 only



Hepatitis B in Alaska Native Persons, 1981-2003



Alaska Native people now have one of the lowest rates of Hep B in the U.S.

2. Diagnose and investigate health problems and health hazards in the community



N40DPJ



The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Outbreak of Vibrio parahaemolyticus Gastroenteritis Associated with Alaskan Oysters

Joseph B. McLaughlin, M.D., M.P.H., Angelo DePaola, Ph.D., Cheryl A. Bopp, M.S., Karen A. Martinek, R.N., M.P.H., Nancy P. Napolilli, B.S., Christine G. Allison, B.S., Shelley L. Murray, B.S., Eric C. Thompson, B.S., Michele M. Bird, M.S., and John P. Middaugh, M.D.

ABSTRACT

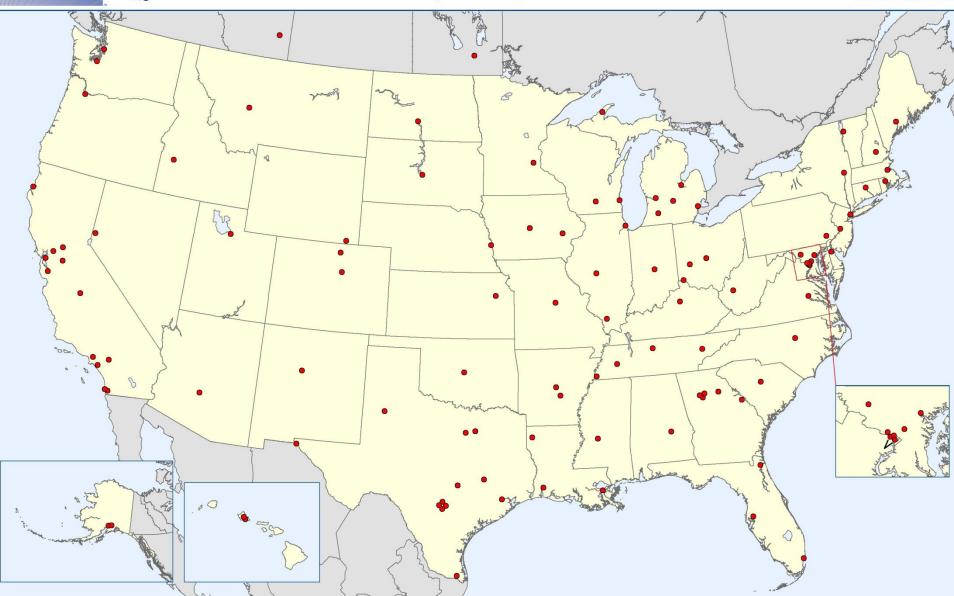
BACKGROUND

Vibrio parahaemolyticus, the leading cause of seafood-associated gastroenteritis in the United States, typically is associated with the consumption of raw oysters gathered from warm-water estuaries. We describe a recognized outbreak of V. parahaemolyticus infection associated with the consumption of seafood from Alaska.



Laboratory Response Network





3. Inform, educate, and empower people about health issues









50?

Then it's time to get screened for colon cancer. Everyone 50 and older should do it.







those and he introduces. The go

"BE STRONG

in Mind, Body,

and Spirit."

- Sandyana Alaska Nation value

HEALTHY HOMES

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Our houses are more than buildings —they are our hornes, and put li-propie they need to breather to be healthy. We must work tagether steps it that way. ANTHYO is marking to represe reduce an equality horness amount Anaba with 64 Flootiley Fairman progress. They reade has medifications and conduct air monitoring in our communities to he discresse the incidence of lung disease, especially in our children, as improve indoor oir quality.

SCREENING FOR LIFE: PREVENTING COLORECTAL CANCER More Alaka Native people are getting scenared for

colorectal cancer than ever before, meeting fewer of our people and femilies are suffering because of this destitating disease. This is great make considering that cancer rename the leading cause of sletch among Alaska Native people, and coloractel cercan is the leading cause. of new costs of cencer for our people. We are getting: healther because our people around the state not have increased access to health coverings, and are receiving more education and outreach focused on coorectal content prevention.

College that control to a control that gives slowly in the large missing (color) and notion, but it is also preventable and treatible. Early committee concer has no completene. which is who assumings are an Especials. Scientings help discour pre-vanceous growth, which can be easily removed. Coloradal censor is very remedia, when found at an early stage.

Therefore, all men and somer other than 50 should be speeded to colorate render water if there is a fundhistory of the disease. Collegetal cancer is him as continue if you have a parent, slibbing or shift who has hed astrectal server, as you should let your provider know if you have a family history of the disease. The Alaba Nation

Total Health Conceptum (WITHC) recommends that Alieda Nation people start acousting screenings at ago 40. There are secure accounting options available, so it is important to talk with your prevaler about which accounting test is right for you.

Although our people have made great progress in odiovectal cancer covering and presentiar, more work remains to stop this disease. In fact, the rates of two cases of carcer and deaths share to this disease are taken as high enough Aleke Nether people as

Let's their strict unbound carrier belt to not favor, and frame, about it, and meet not not provided to about when and other screenings are right for us. Those are healthy, and possibly bleasing, concensions as all uss, have that all right our people healther

Copics

WANTED VISITORS

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FOR IMMEDIATE RELEASE: July 31, 2014

Contact: Dr. Bob Gerlach, Department of Environmental Conservation, 907-375-8214,

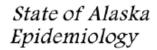
bob.gerlach@alaska.gov

Dr. Ali Hamade, Department of Health and Social Services, 907-269-8086,

ali.hamade@alaska.gov

Further analyses confirms Alaska seafood is safe from Fukushima radiation

JUNEAU— The Alaska departments of Environmental Conservation (DEC) and Health and Social Services (DHSS) have received further results from the U.S. Food and Drug Administration (FDA) on





Bulletin

Department of Health and Social Services

William J. Streur, Commissioner Ward B. Hurlburt, MD, MPH, CMO

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Division of Public Health Kerre Shelton, Director

Local (907) 269-8000 24 Hour Emergency (800) 478-0084 Editors: Joe McLaughlin, MD, MPH Louisa Castrodale, DVM, MPH

Bulletin No. 20 September 23, 2014

Palivizumab Prophylaxis — Alaska, 2014-15 RSV Season

Background

Respiratory syncytial virus (RSV) is the most common cause

2014-15 RSV season starts prior to November 30, Medicaid will adjust the coverage dates accordingly (Table).



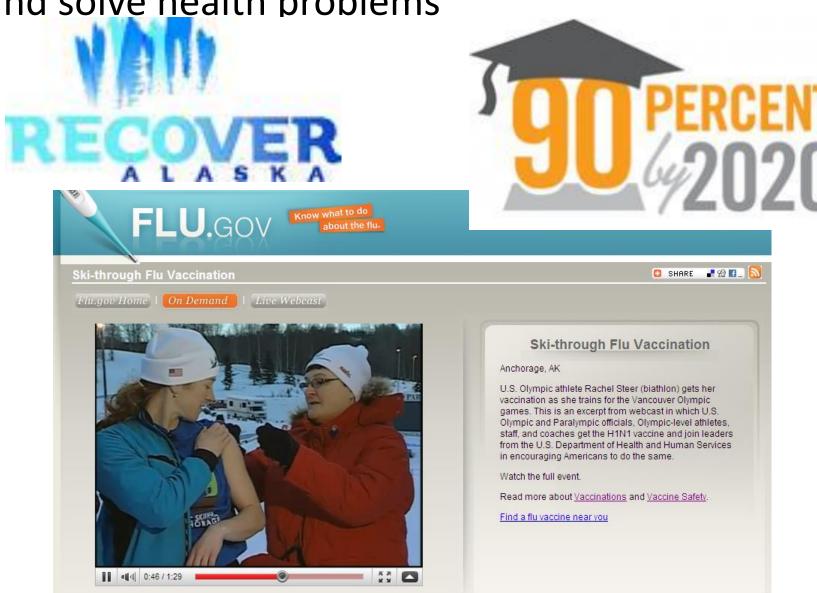
HALE BOREALIS FORUM

September 27-30, 2014 • Hilton Hotel, Anchorage, AK

Live from Atlanta...Good Morning America with Robin Roberts and Dr. Rich Besser



4. Mobilize community partnerships to identify and solve health problems



To Prevent Transmission of Infections in Healthcare



Injection Safety is Every Provider's Responsibility







Oklahoma State Dept. of Health

09-11-01

YOU CAN NOT STOP US.

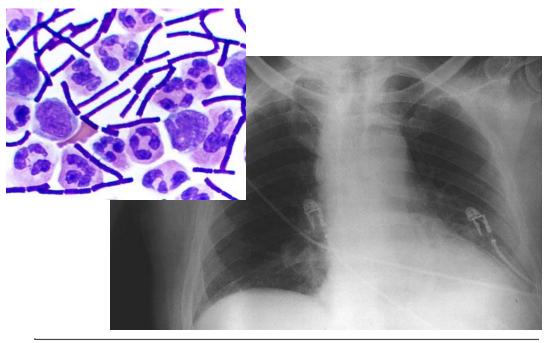
YOU DIE NOW.

ARE YOU AFRAID?

DEATH TO AMERICA.

DEATH TO ISRAEL.

ALLAH IS GREAT.



BIOTERRORISM-RELATED ANTHRAX

Collaboration between Public Health and Law Enforcement: New Paradigms and Partnerships for Bioterrorism Planning and Response

Jay C. Butler,* Mitchell L. Cohen,* Cindy R. Friedman,* Robert M. Scripp,† and Craig G. Watz†

The biological attacks with powders containing *Bacillus anthracis* sent through the mail during September and October 2001 led to unprecedented public health and law enforcement investigations, which involved thousands of investigators from federal, state, and local agencies. Following recognition of the first cases of anthrax in Florida in early October 2001, investigators from the Centers for Disease Control and Prevention (CDC) and the Federal Bureau of Investigation (FBI) were mobilized to assist investigators from state and local public health and law enforcement agencies. Although public health and criminal investigations have been conducted in concert in the past, the response to the anthrax attacks required close collaboration because of the immediate and ongoing threat to public safety. We describe the collaborations between CDC and FBI during the investigation of the 2001 anthrax attacks and highlight the challenges and successes of public health and law enforcement collaborations in general.



5. Develop policies and plans that support individual and community health efforts

VETT ET AL.

J. A. M. A. Oct. 25, 1947

Special Article

MEDICAL CONDITIONS IN ALASKA

A Report by a Group Sent by the American Medical Association

HARRY BARNETT, M.D.

JACK FIELDS, M.D.

GEORGE MILLES, M.D.

JOSEPH SILVERSTEIN, M.D.

and

ARTHUR BERNSTEIN, M.D. Chicago

The advisory committee of the American Medical Association to the Department of the Interior appointed a team to study the over-all medical conditions and problems of the territory of Alaska and to render such special advice and aid as could be given.

Alaska was toured for a period of three weeks. The team arrived in Anchorage July 19 and completed its tour on August 9. The following sites were visited: Anchorage, Seward, Bethel, a native village on the Kuskokwim River, Unalakleet, Nome, Gambell on St. Lawrence Island, Kotzebue, Point Barrow, Tanana, Fairbanks, Juneau, Hoonah, Sitka, Ketchikan and Metlakatla. A total of about 4,500 miles was traveled in Alaska.

The team was capably guided by Dr. C. Earl Albrecht and Dr. Leo Gerhig of the Territorial Department of Health and Dr. Howard Rufus of the Alaska Native Service. Physicians of the Alaska Native Service,



State of Alaska

Hazard Mitigation Plan 2013



Yukon River 2013 Ice Jam Flooding in Galena, AK

Department of Military and Veterans Affairs

Prepared By

Division of Homeland Security and Emergency Management

October 2013

Tobacco-Free Policy Toolkit for Healthcare Facilities



Developed by the State of Alaska

Tobacco Prevention and Control Program with

Alaska Native Tribal Health Consortium

Nicotine Research and Control Program

University of Alaska Pandemic Preparedness Plan

6. Enforce laws and regulations that protect health and ensure safety





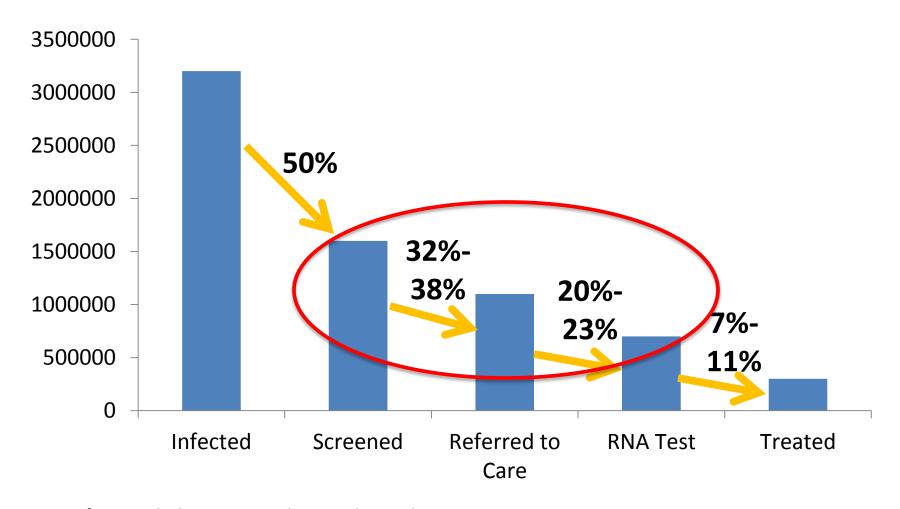


7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable





Link to Care: Estimated Proportion of HCV-Infected Persons Screened, Referred, Confirmed, Treated, U.S.



Data from Holmberg SD, et al. N Engl J Med 2013;368:1859-61

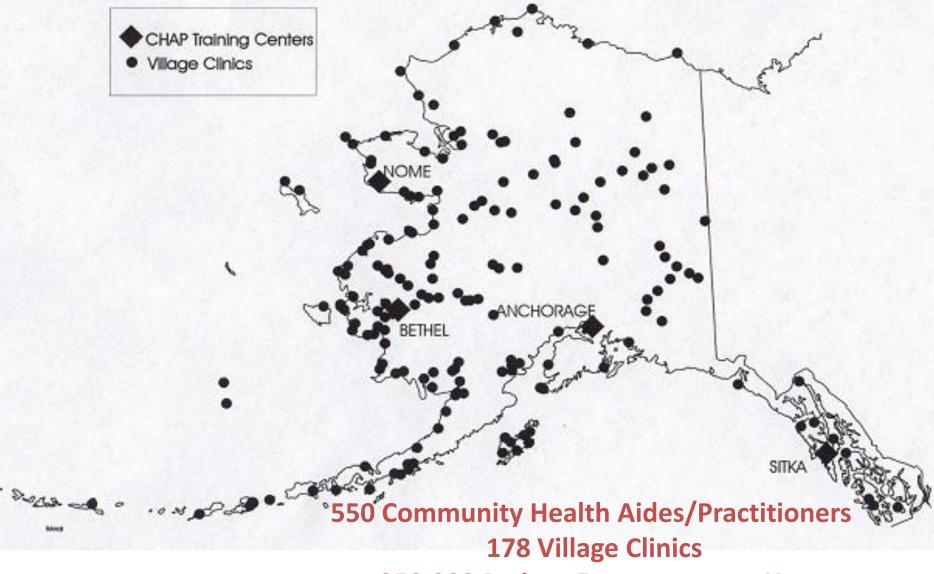
8. Assure a competent public and personal health care workforce



Betty Guy, CHA, in Kwethluk circa 1972

From: Nice P, Johnson W. The Alaska Health Aide Program: A Tradition of Helping Ourselves, 1998

Community Health Aide/Practitioner Village Clinics



~250,000 Patient Encounters per Year

Golnick C, et al. Int J Circumpolar Health 2012

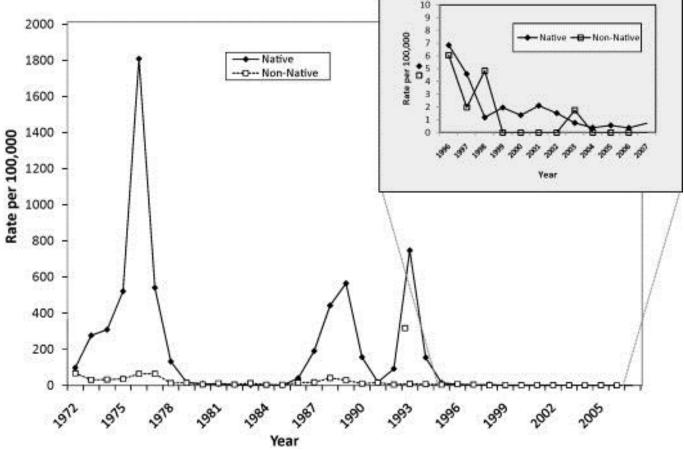
Dental Health Aide Therapist Program







9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services



Hepatitis A, Alaska, 1972-2007

10. Research for new insights and innovative solutions to health problems

Immunogenicity and Reactogenicity of Pneumococcal Polysaccharide and Conjugate Vaccines in Alaska Native Adults 55–70 Years of Age

Karen M. Miernyk, Jay C. Butler, Lisa R. Bulkow, Rosalyn J. Singleton, Thomas W. Hennessy, Catherine M. Dentinger, Helen V. Peters, Barbara Knutsen, Jack Hickel, and Alan J. Parkinson

¹Alaska Native Tribal Health Consortium, ²Arctic Investigations Program, Division of Emerging Infections and Surveillance Systems, National Center for Preparedness, Detection, and Control of Infectious Diseases, Coordinating Center for Infectious Diseases, Centers for Disease Control and Prevention, and ³Southcentral Foundation, Anchorage, Alaska

Clin Infect Dis 2009; 49:214-8

Morbidity and Mortality Weekly Report

Use of 13-Valent Pneumococcal Conjugate Vaccine and 23-Valent Pneumococcal Polysaccharide Vaccine Among Adults Aged ≥65 Years: Recommendations of the Advisory Committee on Immunization Practices (ACIP)

Sara Tomczyk, MSc^{1,2}, Nancy M. Bennett, MD^{3,4}, Charles Stoecker, PhD⁵, Ryan Gierke, MPH², Matthew R. Moore, MD², Cynthia G. Whitney, MD², Stephen Hadler, MD², Tamara Pilishvili, MPH² (Author affiliations at end of text)

MMWR 2014; 63:822-5 (Sept 19, 2014)

